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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: MAKOTO TANIGUCHI, et al

Serial No.: 09/047,717

Group No.: 1714 Filed: MARCH 25, 1998

Examiner: C. SHOSHO For: INK COMPOSITION COMPRISING CATALOG, WATER-SOLUBLE RESIN

RESPONSE UNDER 37 C.F.R. 1.116 EXPEDITED PROCEDURE **EXAMINING GROUP** 1714

RECEIVED DEC 2 3 2002 TC 1700

Box AF **Assistant Commissioner for Patents** Washington, D.C. 20231

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AMENDMENT OR RESPONSE AFTER FINAL REJECTION—TRANSMITTAL

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"Since the filing of correspondence under \S 1.10 without the Express Mail mailing label thereon is an oversight that can be avoided by the exercise of reasonable care, requests for waiver of this requirement will not be granted on petition." Notice of Oct. 24, 1996, 60 Fed. Reg. 56,439, at 56,442.

1.	Transm	itted her	ewith is an ame	ndment afte	r final reje	ectio	on (37 C.	F.R. 1.11	6) fo	or this a	pplication	•
NOTE:	Response to Final Rejection—Avoiding Extension Fees "In patent applications wherein a three month Shortened Statutory Period (SSP) is set for response to a Final Rejection, the response would best be filed within two months of the date of the Office Action, If filed within two months, any Advisory Action mailed after the SSP expires will reset the SSP to expire on the date of the Advisory Action for extension fee purposes, but never more than six months from the date of the Final Rejection." Notice of Nov. 30, 1990 (1122 O.G. 571 to 591).								s et			
				STA	ATUS							
NOTE:	Applicant is [] a small entity. A statement: [] is attached.							RECEIVE				
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	[X]	other th	ian a sinan citu	ity.					-	ГС	1700)
			I	EXTENSIO	N OF TH	ERN	Л			. •	•	
NOTE:		upplement 35) states:	tal Amendment file	ed in response	to a final oj	ffice	action, the	e Notice of	Dece	ember 10	0, 1985 (106	1
		filing and of the she allowand	ely response has b d/or entry of a Noti ortened statutory _l ce. Of course, if a N ed to run.''	ice of Appeal o period unless Notice of Appea	r filing and/ the timely-fi al has been f	or er led r liled	itry of an a esponse p within the	idditional a laced the a	imen ipplic	dment aj cation in	ter expiratio condition fo	n or
3.			(com	plete (a) or	(b), as ap	plic	cable)					
	(a)	Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for the total number of months checked below:							/ :			
		Extensi	ion	I	ee for oth	ner t	han		Fe	e for		
		(month	<u>s)</u>	<u>s</u>	mall entit					all ent		
	[]	one mo		9					\$	55.00		
	[X]	two mo		9					\$	200.00		
		three m		3	920.00 1,440.00				\$ \$	460.00 720.00		
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					Fe	ee:	\$	400,00	<u>'</u>			
If addi	tional ex	tension	of time is requ	ired, please	consider (this	a petitio	n therefo	r.			
			(check and	complete th	e next ite	m, i	f applica	ible)				
	[]	An external strength of the st	ension foris dec	months ducted from	has alread the total f	ly bo	een secu lue for th	red and the total mo	he f	ee paid s of ext	therefor of tension no	of w
			Extension fee	due with the	nis reques	t	\$		_			
					OR							
	(b)	[]	Applicant bel tional petition inadvertently	n is being n	nade to pr	ovi	de for th	e possibi	ility	that ap	oplicant h	as

(Amendment or Response After Final Rejection—Transmittal—page 2 of 4) 9-20

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col.1)_		(Col. 2)	(Col. 3)	SMALL	ENTITY	OTHER THAN A SMALL ENTITY			
	Claims									
	Remaining	g	Highest No.							
After		Previously	Present		Addit.			Addit.		
	Amendmen	nt	Paid For	Extra	Rate	Fee	OR	Rate	Fee	
Total	*	Minus	**	=	x \$ 9 =	\$		x \$18 =	\$	
Indep.	*	Minus	***	=	x \$42 =	\$		x \$84 =	\$	
[] First	Presentation	n of Mul	tiple Depender	nt Claim	+ \$140 =	: \$		+ \$280 =	\$	
					Total		OR	Total	 	
					Addit. Fee	\$		Addit. Fee	\$	

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

WARNING: See 37 C.F.R. § 1.116.

(complete (c) or (d), as applicable)

(c) [X] No additional fee is required.

OR

(d) Total additional fee required is \$_____.

FEE PAYMENT

5. [X] Attached is a check in the sum of \$ _____400.00 .

[] Charge Account No. ______ the sum of \$ _____.

A duplicate of this transmittal is attached.

FEE DEFICIENCY

NOTE: Where there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the case. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, (1065 O.G. 31-33).

6. If any additional extension and/or fee is required, charge Account No. 12-0425

AND/OR

If any additional fee for claims is required, charge Account No. 12-0425

SIGNATURE OF PRACTITIONER

ELIEFORD J. MASS

(type or print name of practitioner)

LADAS & PARRY

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